



Teller County Community Service Office
11400 Hwy 24
P.O. Box 27 • Divide, CO 80814
Office: (719) 304-5763 Email: Tellercom@co.teller.co.us

Community Service Participation Agreement

Instructions: Complete all areas on this page. Read the program rules and regulations located on the back of this page then sign at the bottom of the page. The fee for Community Service is \$120.00. This **must** be paid when you sign up. A payment plan is also available. You may pay by money order cash (exact change preferred). Please do not send cash in the mail. If you elect to sign up prior to sentencing, you **will not** receive a refund if your case is dismissed or you are not sentenced to community service. **ABSOLUTELY NO REFUNDS! NO EXCEPTIONS!**

PERSONAL INFORMATION

Full Name _____ Date of Birth _____

Physical Address _____

City, State Zip Code _____

Phone Number _____ Email _____

Emergency Contact Name _____ Emergency Contact Number _____

Physical or Mental Limitations (Please advise if you have a medical restriction or concern)

CASE INFORMATION

Offense(s) Charged with or Convicted of _____

Gaming Related Y N

Case Number _____ Sentencing County _____

Sentencing Date _____

Hours Required _____ Completion Date _____

Are you currently on supervised Probation? Y N If yes, Probation Officer _____

Have you been convicted of a sex offense? Y N If Yes, what year? _____

Have you been convicted of an assault? Y N If Yes, what year? _____

I understand that the above information will be used to help in job placement. I give my permission to the Community Service Coordinator to exchange this information with the agency where I am going to work.

I certify that answers given are true and complete to the best of my knowledge.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF PARENT OR GUARDIAN (IF UNDER 18)



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Community Service/Useful Public Service (UPS) Program Rules and Policies

All fees are **non-refundable** and must be paid by cash or money order. No personal checks or credit/debit cards.

Your Community Service Coordinator must approve all community service assignments prior to you beginning work with them.

No Buyouts, donations or gratuity in lieu of hours. Any attempts to falsify useful public service hours in any way will result in criminal charges according to Colorado law.

You are responsible for updating this office if you receive an extension or modification to your case.

It is your responsibility to contact the agency where you are going to do your community service hours.

The actual work schedule is determined by the agency supervisor and yourself.

You are expected to complete all of your hours at the assigned agency. If you need to change your assignment, please contact the Teller County Community Service Office.

You should treat this placement as a regular job:

- Dress appropriately and in accordance with the agency's dress code
- Maintain the schedule agreed to
- Call the agency supervisor if you cannot be there
- Work efficiently and effectively

It is your responsibility to adhere to the physical limitations you listed on the application form and to understand and abide by the safety rules and regulations of the agency where you will be working. Carelessness, negligence, and/or disregard for these rules may result in your being denied any claim against TELLER COUNTY SHERIFF or the placement agency.

If you have an accident requiring medical attention while performing community service, contact the agency work supervisor. Go to the emergency or health care facility of your choice and have the bill placed in your name. Contact our office within 48 hours after treatment to make an appointment for filing an insurance claim.

Any one of the following violations is grounds for termination from agency and/or program:

- Belligerent or disagreeable attitude
- Leaving the work site without checking with supervisor
- Obvious symptoms of alcohol or drug abuse

Termination from the program may result in a Bench Warrant being issued for your arrest. You are required to keep the Community Service Coordinator advised of your current address and phone number or message number, as well as any placement problems.

The last day you will be permitted to work is _____

I have read and understand the above rules and regulations.

Signature

Date